Attorney Docket No.: 60009(49991)

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on November 3, 2008

Date

/Nicholas J. DiCeglie, Jr./
Signature

Nicholas J. DiCeglie, Jr.

Typed or printed name of person signing Certificate

51,615
(212) 308-4411
Registration Number, if applicable
Telephone Number

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Amendment and Response to Non-Final Office Action (14 Pages) Petition for Extension of Time for one (1) month (1 Page)

Fee Transmittal (1 Page)

Charge Deposit Account 04-1105 - \$130.00

PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pa	aperwork Reduction Act of	1995, no person are r	equired to	respond to a collection				B control number
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009				Complete if Known Application Number 10/516,418-Conf. #4955				
				Filing Date N		May 13, 2005 Edouard S.P. Bouvier		
				Applicant claims small entity status. See 37 CFR 1.27				Art Unit
TOTAL AMOUNT OF PAYMENT		(\$) 130.00				60009(49991)		
METHOD OF	PAYMENT (check	all that apply)		<u> </u>	<u>t</u>			
Check	Credit Card	Money Order	Nor	ne Other (please identify	١٠		
l⊨ ˈ	count Deposit Account N	」 ′	·1105			 Edwards Ange	ell Palmer &	& Dodge LLP
For the	above-identified depo	sit account, the D	irector is	hereby authorize	ed to: (check	all that apply))	
1 —	harge fee(s) indicated				•	cated below, e		the filing fee
	harge any additional f e(s) under 37 CFR 1.		ments of	f x Credit	any overpa	yments		
FEE CALCU	LATION							
1. BASIC FILIN	G, SEARCH, AND EX	(AMINATION FE	≣S					
	FIL	ING FEES	SEA	ARCH FEES	EXAMIN	ATION FEES		
Application To	ype Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85	-	
Reissue	330	165	540	270	650	325	-	
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							52	26
Multiple dependent claims							220 390	110 195
				oo Boid (\$)	M.	ultinla Danana		
<u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> - 20 or HP				ee Paid (\$) <u>Multiple Dep</u> Fee (\$)			Fee Paid (\$)	
HP = highest num	ber of total claims paid for	- "			100	· <u>\Ψ/</u>	ree raia (<u> ¥1</u>
Indep. Claims	Indep. Claims		 Fee Paid (\$)					
l								
HP = highest num	ber of independent claims	paid for, if greater tha	in 3.					
3. APPLICATIO								
	ation and drawings extended to the state of							50
	action thereof. See 3				ioi sinan cii	inty) for cacif a	iddinonai .	,,,
Total Sheet				dditional 50 or frac	ction thereof	Fee (\$)	Fee	Paid (\$)
	 - 100 =			(round up to a who			=	
4. OTHER FEE(S)							Fees	s Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1251 Extension for response within first month							130.00	
SUBMITTED BY								
Signature / Micholas DiCoglio Ir /				Registration No. (Attorney/Agent)	51,615	,615 Telephone (212) 308-4411		
Name (Print/Type) Nicholas J. DiCeglie, Jr.				(Attorney/Agent)	Date November 3, 2008			
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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: November 3, 2008 Electronic Signature for Nicholas J. DiCeglie, Jr.: /Nicholas J. DiCeglie, Jr./